## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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08/06/2004

MARSTELLER & ASSOCIATES, P.C. PO BOX 803302 DALLAS, TX 75380-3302

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Thomas F. M	arsteller, Jr.	(Depositor's name)
Thoms	7 Martelly	(Signatore)
30 As	4 2004	(Date)
(C)P	ATTORNIEV DOCKETNO	CONTRACTON NO

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/064,588	07/29/2002	Zhonglin Wu	000115-210	5119	

TITLE OF INVENTION: LEAKAGE FREE CERAMIC FILMS FOR POROUS SURFACES

APPLN. TYPE	SMALL ENTITY	ISSUE F	FEE PUBLICATION PEE		TOTAL	FEE(S) DUE	DATE DUE 11/08/2004	
nonprovisional	NO	\$1330	)	\$300		1630		
EXA	MINER	ART UN	IT	CLASS-SUBCLASS	]			
TURNER,	ARCHENE A	1775		427-190000	- ·			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		<ol> <li>For printing on the patent front page, list</li> <li>the names of up to 3 registered patent attorneys or agents OR, alternatively.</li> <li>the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</li> </ol>		1 Marste	ller & Associates, P.C.			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				3				

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Carleton Life Support Systems, Inc.

Orchard Park, NY

4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):				
Missue Fee	☐ A check in the amount of the fee(s) is enclosed.				
APublication Fee (No small entity discount permitted)  Payment by credit card. Form PTO-2038 is attached.					
☐ Advance Order - # of Copies	U The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above)					
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).				

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. er party in

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(Authorized Signature)		1	(Date)						

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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